Application Data Sheet

Application Information

Application Type:: Regular

Subject Matter:: Utility

Suggested Group Art Unit::

Title:: CASH DISPENSING AUTOMATED BANKING

MACHINE WITH IMPROVED CARD RETENTION

CAPABILITIES AND METHOD

Suggested Classification:: 235/379

Suggested Group Art Unit:: 2876

Attorney Docket Number:: D-1219 R4

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure:: 20

Total Drawing Sheets:: 19

Small Entity:: No

Petition included?:: No

Secrecy Order in Parent Appl.?:: No

Applicant Information

Inventor Authority Type:: Inventor

Primary Citizenship Country:: Italy

Status:: Full Capacity

Given Name:: Pietro

Middle Name::

Family Name:: Scarafile

Name Suffix::

City of Residence:: Torino

State or Prov. Of Residence::

Country of Residence:: Italy

Street of mailing address:: Via Goito, 16, 10036 Settimo Torinese

City of mailing address:: Torino

State or Province of mailing address::

Country of mailing address:: Italy

Primary Citizenship Country:: Italy

Status:: Full Capacity

Given Name:: Piero

Middle Name::

Family Name:: Ghiringhelli

Name Suffix::

City of Residence::

State or Prov. Of Residence::

Country of Residence:: Italy

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address:: Italy

Inventor Authority Type::

Inventor

Primary Citizenship Country::

Italy

Status::

Full Capacity

Given Name::

Giorgio

Middle Name::

Family Name::

Cerioni

Name Suffix::

City of Residence::

Torino

State or Prov. Of Residence::

Country of Residence::

Italy

Street of mailing address::

Via Circonvallazione 76/1, 10018 Pavone Canavese

City of mailing address::

Torino

State or Province of mailing address::

Country of mailing address::

Italy

Inventor Authority Type::

Inventor

Primary Citizenship Country::

Italy

Status::

Full Capacity

Given Name::

Francesco

Middle Name::

Family Name::

Ferraro

Name Suffix::

City of Residence::

Piverone

State or Prov. Of Residence::

Country of Residence::

Italy

Street of mailing address::

Strada per Magnano, 21

City of mailing address::

Piverone

State or Province of mailing address::

Country of mailing address::

Italy

Postal or Zip Code of mailing address::

10010

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Natarajan

Middle Name::

Family Name:: Ramachandran

Name Suffix::

City of Residence:: Uniontown

State or Prov. Of Residence:: OH

Country of Residence:: US

Street of mailing address:: 2424 Lyndon Drive

City of mailing address:: Uniontown

State or Province of mailing address:: OH

Country of mailing address:: US

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Zachary

Middle Name::

Family Name:: Utz

Name Suffix::

City of Residence:: North Canton

State or Prov. Of Residence:: OH

Country of Residence:: US

Street of mailing address:: 8194 Overwood Avenue

City of mailing address:: North Canton

State or Province of mailing address:: OH

Country of mailing address:: US

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Kenneth

Middle Name::

Family Name:: Turocy

Name Suffix::

City of Residence:: Akron

State or Prov. Of Residence:: OH

Country of Residence:: US

Street of mailing address:: 461 Woodcrest Drive

City of mailing address:: Wadsworth

State or Province of mailing address:: OH

Country of mailing address:: US

Postal or Zip Code of mailing address:: 44281

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Inventor Authority Type::

Inventor

Primary Citizenship Country::

US

Status::

Full Capacity

Given Name::

Jim

Middle Name::

Family Name::

Booth

Name Suffix::

City of Residence::

Kimbolton

State or Prov. Of Residence::

ОН

Country of Residence::

US

Street of mailing address::

13223 Egress Road

City of mailing address::

Kimbolton

State or Province of mailing address::

OH

Country of mailing address::

US

Postal or Zip Code of mailing address::

43749

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Paul

Middle Name:: D.

Family Name:: Magee

Name Suffix::

City of Residence:: North Canton

State or Prov. Of Residence:: OH

Country of Residence:: US

Street of mailing address:: 1113 North Main Street, Apt. 147

City of mailing address:: North Canton

State or Province of mailing address:: OH

Country of mailing address:: US

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: David

Middle Name:: A.

Family Name:: Barker

Name Suffix::

City of Residence:: North Canton

State or Prov. Of Residence:: OH

Country of Residence:: US

Street of mailing address:: 1372 Butler Street

City of mailing address:: North Canton

State or Province of mailing address:: OH

Country of mailing address:: US

Postal or Zip Code of mailing address:: 44720

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Correspondence Information

Correspondence Customer Number:: 28995

Representative Information

Representative Customer Number::	28995

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	An application claiming	60/453,365	03/10/2003
	the benefit under		
	35 U.S.C. 119(e)		

Assignee Information

Assignee Name:: Diebold Self-Service Systems

Division of Diebold, Incorporated

City of mailing address:: North Canton

State or Province of mailing address:: OH